

BUILDING DEPARTMENT 12453 Hwy 92 Ste 105 Woodstock, GA 30188 Phone: 770.592.6036

www.woodstockga.gov

woodstockbuilding@woodstockga.gov

FIRE DEPARTMENT REVIEW APPLICATION

						SUBMITTAL DATE:			
	PLEASE TYPE OR PR			<u>T</u> PERMIT No.:					
PROJECT INFORM	MATION:								
=							#:		
Address:			_ ZIP:	C	COUNTY: CHEF	ROKEE			
		RESIDENTIAL	☐ Co	MMERCIAL					
☐ NEW	ALTERATION	RATION ADDITION			ACCESSORY STRUCTURE REPAIR				
	IF NEW SINGLE F	FAMILY HOME:	☐ DETACHED) <u> </u>	ATTACHED				
OWNER INFORMA	<u></u>		_						
NAME:		Phoni	Ξ:	Е	MAIL:				
CONTRACTOR INI	FORMATION:								
CONTACT NAME: _	AD	Address:							
EMAIL:	Рн	PHONE: ALT. PHONE:							
NAME: DESCRIPTION OF	E	EMAIL:		P	HONE:				
OCCUPANCY TYPE	:CONSTRUCTIO	ON TYPE:S		Con	STRUCTION V	ALUE:\$			
has commenced p regulating construct heating, ventilation I certify that all the	by made to obtain a per rior to the issuance of tion in the City of Wood and air conditioning, po e foregoing information ng construction and zor	rmit to do the work f a permit and that Istock. I understant pools, signs, etc. is accurate and a	at all work wil d that a separa	ns as indicated be performed ate permit must	d to meet the be obtained fo	standard or electric	s of all laws al, plumbing,		
APPLICANTS NAME	SIGNA	TURE	OWNER	AGENT	CONTRACTO	OR 🗌	TENANT		
Application reviewe	ed by:	Date:	Appro	ve By:	ı	Date:			